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NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER:	9/546287
a : Et ditt : Off HOMBER:	11310281

Total Fee Calculation

-	Fee Cade	Taul # Claims	Number Extra	Y	Fec	Fee	- Total
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Basic Filing Fee	201/101					<u>690</u>	
Total Claim: >20	203/101 .	20 - 20 -	-	х		-	
Independent Claim: >1	202/102	_3,-	· · · · · · · · · · · · · · · · · · ·	x			
Mult, Dep Claim Present	204/104				***************************************	•	
Surcharge	205/105					<u>130</u> -	
English Translation	117						
TOTAL FEE CALCULA	TION						820
Fees due upon filing th	e application.						
Total Filing Fees Due	= 5	820					
Less Filing Fees Submi	ined - S	Ø	·				
BALANCE DUE	= 5	820		_	· .		
Office of Initial Patent B	Examination					•	
FORM OIPE-RAM-01 (Rev.	. 12/97)	Figu	re 7		·		

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PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 **CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN** (Column 1) (Column 2) TYPE [**SMALL ENTITY** OR NUMBER EXTRA **FOR** NUMBER FILED **RATE** FEE FEE RATE 690.00 **BASIC FEE** 345.00 OR 20 minus 20= **TOTAL CLAIMS** X\$ 9= X\$18= OR minus 3 = INDEPENDENT CLAIMS X39= X78= OR MULTIPLE DEPENDENT CLAIM PRESENT +130= +260= OR * If the difference in column 1 is less than zero, enter "0" in column 2 690 **TOTAL** TOTAL OR **CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY** SMALL ENTITY OR (Column 3) (Column 2) (Column 1) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL **PREVIOUSLY AMENDMENT AFTER EXTRA** FEE PAID FOR **FEE AMENDMENT** Total Minus X\$ 9= X\$18=OR Independent **Minus** = X39 =X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +260= +130= OR TOTAL OR ADDIT. FEE ADDIT, FEE (Column 3) (Column 2) (Column 1) HIGHEST CLAIMS ADDI-ADDI-REMAINING NUMBER **PRESENT** RATE TIONAL **RATE** TIONAL **PREVIOUSLY AFTER EXTRA AMENDMENT FEE** FEE PAID FOR AMENDMENT Total Minus X\$ 9= X\$18= OR Independent Minus = X39= X78= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130 =+260= OR BEST AVAILABLE COPY TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (Column 3) (Column 1) (Column 2) HIGHEST CLAIMS ADDI-ADDI-NUMBER REMAINING **PRESENT RATE** TIONAL RATE TIONAL **PREVIOUSLY** AFTER **EXTRA** AMENDMENT **AMENDMENT** PAID FOR **FEE** FEE Total Minus X\$18= X\$ 9= OR Minus Independent X78= X39= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +130= +260= OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." OR ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number